ABSTRACT
Despite its a priori attractiveness, health insurance schemes are rare in developing countries. A recent external review of the Bamako Initiative in Burundi considered the extent to which the ‘Carte d’Assurance Maladie’ (CAM) has the potential to improve the quality of, and access to, health services. Although utilization of the CAM was found to be low overall, most of those visiting the health centres were in possession of a card, leading the team to conclude that health service utilization for curative care is extremely low. Focus group discussion revealed that users perceive the quality of health services to be poor, and that frequent shortages of basic drugs and supplies create uncertainty as to whether the CAM will provide good value for money, the shortage of basic drugs, the lack of community participation in the management of health services, and the fact that very little of the revenue from sales of the CAM is spent on health service provision provide possible explanations for the weak uptake of health insurance. Closing the link between the payment for health services and the financing of those services would contribute to an improvement in the quality and the confidence of the population in government health services.